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BIBDATASHEET

CONFIRMATION NO. 2114

Bib Data Sheet

SERIAL NUMBER 10/687,391	FILING DATE 10/15/2003 RULE	CLASS 330	GROUP ART UNIT 2817	ATTORNEY DOCKET NO. FUSA 20.682 (100807-00091)
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APPLICANTS

Takayoshi Ode, Kawasaki, JAPAN;

Yasuyuki Oishi, Kawasaki, JAPAN;

Tokuro Kubo, Kawasaki, JAPAN; Kazuo Nagatani, Kawasaki, JAPAN;

Hajime Hamada, Kawasaki, JAPAN;

Hiroyoshi Ishikawa, Kawasaki, JAPAN;

Nobukazu Fudaba, Kawasaki, JAPAN;

** CONTINUING DATA *****

This application is a CON of PCT/JP01/03297 04/18/2001

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 01/20/2004

Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiners Signature _____ Initials _____	STATE OR COUNTRY JAPAN	SHEETS DRAWING 28	TOTAL CLAIMS 17	INDEPENDENT CLAIMS 3
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ADDRESS

026304

KATTEN MUCHIN ZAVIS ROSENMAN

575 MADISON AVENUE

NEW YORK, NY

10022-2585

TITLE

Distortion compensation device

FILING FEE RECEIVED 900	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other
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